


12-06-00

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 10974 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	C0441/7147
		First Named Inventor or Application Identifier	
		FRAZIER, Kevin, et al	
		Express Mail Label No.	EL018096375US
		Date of Deposit	December, 5, 2000

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents		ADDRESS Box Patent Application TO: Commissioner for Patents Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total pages 36] 29 - pages description 1 - pages abstract 6 - pages claims 21 - Total claims		7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets 17] <input type="checkbox"/> Informal <input checked="" type="checkbox"/> Formal [Total drawings 15B]		ACCOMPANYING APPLICATION PARTS
4. <input type="checkbox"/> Oath or Declaration [Total pages 3] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		8. <input checked="" type="checkbox"/> Assignment Papers/cover sheet & documents(s) (copy from prior application) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation of Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Other:		
17. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 08/974,632 <input checked="" type="checkbox"/> Cancel in this application original claims 1-9 and 12-21 of the prior application before calculating the filing fee. <input checked="" type="checkbox"/> Amend the specification by inserting before the first line the sentence: This application is a divisional of application serial no. 08/974,632, filed 11/19/97, entitled MULTI-PROTOCOL PACKET TRANSLATOR, and now pending.		

18. CORRESPONDENCE ADDRESS					
Correspondence address below					
ATTORNEY'S NAME	Matthew B. Lowrie, Reg. No. 38,228				
NAME	Wolf, Greenfield & Sacks, P C				
ADDRESS	600 Atlantic Avenue				
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19. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Matthew B. Lowrie, Reg. No. 38,228 M. Brad Lawrence, Reg. No. 47210
SIGNATURE	
DATE	December 5, 2000

Inventor or Identifier: FRAZIER, Kevin, et al

Serial No: Not yet assigned

Filed: Herewith

CHECK BOX, if applicable:

For: MULTI-PROTOCOL PACKET TRANSLATOR

☐ **DUPLICATE**

Fee Calculation Sheet

CLAIMS	FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))		2-20=	0 x	\$18	= \$ 0.00
INDEPENDENT CLAIMS (37 CFR 1.16(b))		1-3=	0 x	\$78	= \$ 0.00
MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) +				\$260	= \$
				BASIC FEE (37 CFR 1.16(a))	\$ 710.00
Total of above Calculations =					\$ 710.00
Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).					\$
Assignment Recordation Fee (if any)					\$
Other Fees (if any).					\$
TOTAL =					\$ 710.00

1. A check in the amount of \$ 710.00 is enclosed.

General Authorization to Charge Deposit Account and General Request for Extension of Time

2. a. ☒ If the filing of any paper in this application necessitates the payment of a fee under 37 CFR §§ 1.16 ☒ 1.17 or ☐ 1.18, and the fee due is in an amount different from any enclosed check or if no check is enclosed, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 23/2825.
- b. ☒ The applicant hereby revokes any prior authorization to charge a fee due under 37 CFR §§ 1.16 ☐ 1.17 or ☐ 1.18.
3. If the filing of any paper in this application necessitates an extension of time under 37 CFR §1.136(a), the applicant hereby requests such extension of time. If the fee due is in an amount different from any enclosed check or if no check is enclosed, the Commissioner is hereby authorized to charge any deficiency or credit any overpayment to Deposit Account No. 23/2825.


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 Attorneys of Record

Docket No. C0441/7147
 Date: December 5, 2000

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kevin Frazier, et al.
 Serial No: To be assigned
 Filed: Herewith
 For: MULTI-PROTOCOL PACKET TRANSLATOR
 Examiner: Not yet assigned
 Art Unit: Not yet assigned

COMMISSIONER FOR PATENTS
 WASHINGTON, D.C. 20231

Sir:

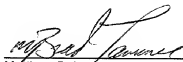
Transmitted herewith is a Preliminary Amendment in the above-identified application.

The fee has been calculated as shown below:

CLAIMS AS AMENDED

	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Additional Fee
TOTAL CLAIMS	12 -	20 =	0 X	\$ 18	= \$ 0.00
INDEP. CLAIMS	2 -	3 =	0 X	\$ 80	= \$ 0.00
MULTIPLE DEPENDENT CLAIM					= \$ 0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					= \$ 0.00

- ☒ No additional fee is required
☒ Return Postcard
☒ Please charge any additional fees or credit overpayment to Deposit Account 23/2825. A duplicate of this sheet is enclosed.



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